



Docket No. SUN-P3729
(811173-000184)

2124
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Joshua B. Susser et al.
SERIAL NO.: 09/243,101
FILING DATE: February 2, 1999
TITLE: OBJECT-ORIENTED INSTRUCTION SET FOR RESOURCE-
CONSTRAINED DEVICES
EXAMINER: Tuan A. Vu (Tel. No.: (703) 305-7207)
(Fax No.: (703) 872-9306)
ART UNIT: 2124

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Date: 7-19-04

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AMENDMENT AND RESPONSE TO OFFICE ACTION

Sir:

In response to the Office Action of May 24, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begin on page 2 of this paper.

Remarks/Arguments begin on page 19 of this paper.



PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/243,101
	Filing Date	February 2, 1999
	First Named Inventor	Joshua B. Susser
	Art Unit	2124
	Examiner Name	Tuan A. Vu
Total Number of Pages in This Submission	Attorney Docket Number	SUN-P3729

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): return postcard
Remarks		RECEIVED JUL 26 2004 Technology Center 2100

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	John P. Schaub, Reg. No. 42,125 - Thelen Reid & Priest LLP		
Signature			
Date	7/16/04		

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